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FACSIMILE COVER SHEET

DATE:	December 27, 2004		
	TIME:	1:07 PM	
RECIPIENT USPTO	FAX NUMBER 703-746-4000	COMPANY/FIRM NAME USPTO	PHONE NUMBER
FROM:	Samuel DiGirolamo		
DIRECT DIAL:	(314) 345-6225	DIRECT FAX:	(314) 345-6325
OPERATOR:	Jennifer C.	EXT. NO.:	6620
BILLING CODE:	717281.3	TOTAL # OF PAGES:	3

MESSAGE: USPTO:

TO WHOM IT MAY CONCERN:

PLEASE DISREGARD THE FAX JUST SENT TO YOU, THE NAME OF THE ASSIGNEE IS MISSPELLED.

PLEASE MAKE NOTE OF THE CORRECT ASSIGNEE NAME: STELLAR TECHNOLOGY COMPANY.

THANK YOU.

Sam DiGirolamo

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27128 7590 10/27/2004

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Jennifer Christopher

(Depositor's name)

Jennifer Christopher

(Signature)

(Date)
10/27 Dec. 04

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/064,929	08/29/2002	Thomas V. Cunnelly JR.	717281.3	2353

TITLE OF INVENTION: LAYERED TABLET WATER TREATMENT COMPOSITIONS AND METHOD OF USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
Nonprovisional	YES	\$685	\$300	\$985	01/27/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
LAWRENCE JR, FRANK M	1724	210-753000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122 attached).
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Blackwell Sanders**
Pepper Martin LLP

2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Stellar Technology Company**Sauget, Illinois US**Please check the appropriate assignee category or categories (will not be printed on the patent). Individual Corporation or other private group entity Government

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5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date 27 Dec. 04Typed or printed name Samuel DigirolamoRegistration No. 29,915

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FAX NUMBER : 3143456060
 NAME : BLACKWELL SANDERS

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 PAGE : 1
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20128 7PM 10/27/2004

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Jennifer Christopher

[Signature]

10/27/2004

APPLICATION NO.	PIFING DATE	FIRST NAME/INVENTION	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10M64.020	08/29/2002	Thomas V. Connolly Jr.	717281.3	3333

TITLE OF INVENTION: LAYERED TABLET WATER TREATMENT COMPOSITIONS AND METHOD OF USE

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
non provisional	YES	\$618	\$100	\$488	01/27/2005

EXAMINER	AK UNIT	CLASS/KIND/CASE
LAWRENCE JR. FRANK, M.	1224	210-753000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.32).
 Change of correspondence address (or Change of Correspondence Address Form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication Form PTO/SB/17; Rev 03/2001 or later Recd. Ref. No. _____) attached. Use of e-Claims™ is required.

2. Per paying on the patent front page, list

- (1) the name of or (2) 3 registered patent attorney or agent, individually:
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Blackwell Sanders
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3. ATTORNEY NAME AND ROSTER/CHIEF DATA TO BE PRINTED ON THIS PATENT (print or type)
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(A) NAME OF ATTORNEY

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Steller Technology Company

Sauger, Illinois US

Please check the appropriate assignee category or categories (will not be printed on the patent). Individual Corporation or other private entity only. Government

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Authorized Signature

Samuel D. Christopher

Date: 27 Dec 04

Registration No. 29,315

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